

RECEIVED

**STATE OF SOUTH DAKOTA**  
**Statement of Legal Newspaper Ownership and Circulation**

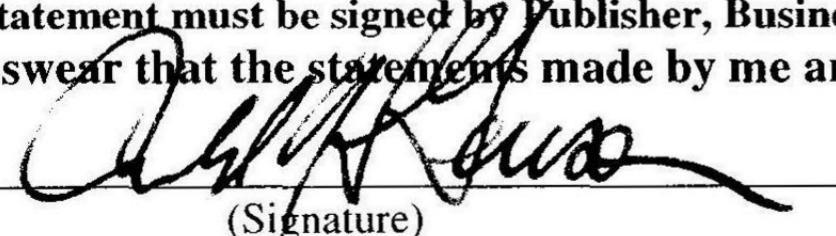
Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

S.D. SEC. OF STATE

1. TITLE OF NEWSPAPER <i>Baltic Beacon</i>		2. DATE <i>10-1-04</i>
3. FREQUENCY OF ISSUE <i>Weekly</i>	3A. NO. OF ISSUES PUBLISHED ANNUALLY <i>52</i>	3B. ANNUAL SUBSCRIPTION PRICE \$ <i>20<sup>00</sup></i>
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) <i>PO Box 41 Baltic SD 57003</i>		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) <i>PO Box 5034 Sioux Falls SD 57117</i>		
6. FULL NAME OF PUBLISHER: <i>Arnold H. Garson</i>		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.)  FULL NAME <i>Prairie Publications</i>		COMPLETE MAILING ADDRESS <i>PO Box 5034 S.F. SD 57117</i>
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.)  <i>None</i>		
9. EXTENT AND NATURE OF CIRCULATION		AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS
A. TOTAL NO. COPIES (Net Press Run)		<i>408</i>
B. PAID AND/OR REQUESTED CIRCULATION		ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
1. Sales through dealers and carriers, street vendors and counter sales.		<i>70</i>
2. Mail Subscription (Paid and or requested)		<i>222</i>
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)		<i>292</i>
D. FREE DISTRIBUTION		<i>0</i>
1. BY MAIL, CARRIER OR OTHER MEANS		<i>0</i>
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES		<i>32</i>
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)		<i>324</i>
F. COPIES NOT DISTRIBUTED		<i>56</i>
1. Office use, left over, unaccounted, spoiled after printing		<i>65</i>
2. Return from News Agents		<i>28</i>
G. TOTAL (Sum of E, F1 and F2 - Should equal net press run shown in A)		<i>408</i>
		<i>406</i>

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

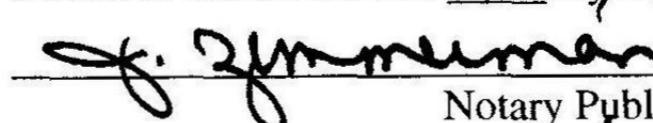
I swear that the statements made by me are true, correct, and complete:

  
 (Signature)

Publisher

(Title)

Sworn to before me this 5<sup>th</sup> day of Oct., 2004

  
 Notary Public

My commission expires: 12/22/09

State of South Dakota

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County of Minnehaha

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(Seal)

